


**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007**

FILED

2007 MAR 23 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # A94000001815			
1. Entity Name BENAIM FAMILY LIMITED PARTNERSHIP			
Principal Place of Business 956 POMPANO DR. JUPITER, FL 33458		Mailing Address C/O MONROE N. BENAIM P.O. BOX 3719 TEQUESTA, FL 33469	
2. Principal Place of Business - No P.O. Box # 7340 S.W. 56th St		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Miami FL		City & State	
Zip 33155	Country USA	Zip	Country
6. Name and Address of Current Registered Agent BENAIM, MONROE N 535 E. INDIANTOWN RD. JUPITER, FL 33477		7. Name and Address of New Registered Agent	
<p align="center"><i>Address change only →</i></p>		Name	
		Street Address (P.O. Box Number is Not Acceptable) 956 POMPANO Dr.	
		City Jupiter	Zip Code FL 33458
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable.			
FILE NOW!!! FEE IS \$500.00			
After May 1, 2007, Fee will be \$900.00			
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.			
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P94000051284 BENAIM, INCORPORATED 7340 S.W. 56TH STREET MIAMI, FL 33156	STREET ADDRESS	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes			
SIGNATURE: <u>Rivian E Benaim</u>		Date: <u>1/26/07</u> 561 743-4629	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Daytime Phone #	

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